



**APPLICATION
FOR A
SOLID WASTE LANDFILL
NOTICE OF INTENT TO APPLY**

DEP 7061 (9/91)



**Natural Resources and
Environmental Protection Cabinet**

COMMONWEALTH OF KENTUCKY

NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET

DIVISION OF WASTE MANAGEMENT

**18 REILLY ROAD
FRANKFORT, KENTUCKY 40601**

NOTICE OF INTENT TO APPLY ATTACHMENTS

Number	Description	Page Number
1.	<i>Property Owners</i>	_____
2.	<i>Owners of Mineral Rights</i>	_____
3.	<i>Adjacent Property Owners</i>	_____
4.	<i>Written Determination From Local Governing Solid Waste Body</i>	_____
5.	<i>Anticipated Waste Sources, Characteristics, and Amounts</i>	_____
6.	<i>Waste Generation Process</i>	_____
7.	<i>Waste Description and Analyses</i>	_____
8.	<i>Waste Management Methods</i>	_____
9.	<i>Environmental Permits</i>	_____
10.	<i>Original USGS 7.5 Topographic Map</i>	_____
11.	<i>Site Map</i>	_____
12.	<i>Archaeological Information</i>	_____
13.	<i>Threatened or endangered species published information</i>	_____
14.	<i>Wetlands</i>	_____
15.	<i>County Highway Map Showing Location of Site</i>	_____
16.	<i>Existing and Proposed Waste Management Areas</i>	_____
17.	<i>Photographs</i>	_____
18.	<i>Water Quality Certification</i>	_____
19.	<i>Published Geotechnical Information</i>	_____
20.	<i>Rock Coring Plan Narrative</i>	_____
21.	<i>Soil Boring Plan Narrative</i>	_____
22.	<i>Directions, Methods, Accuracy for Soil Borings/Rock Corings</i>	_____
23.	<i>Site Geotechnical Investigation Map</i>	_____
24.	<i>Initial Public Notice</i>	_____

**APPLICATION FOR A SOLID WASTE LANDFILL PERMIT
NOTICE OF INTENT TO APPLY**

A. GENERAL INFORMATION

APPLICATION NO. _____ (LEAVE BLANK ON FIRST SUBMISSION)

FEE SUBMITTED \$ _____ COUNTY _____ DATE _____

1. *Applicant* _____
Address _____
City _____ *State* _____ *Zip Code* _____
Phone No. (_____) _____

2. *Name of Facility* _____
Address _____
City _____ *State* _____ *Zip Code* _____
Phone No. (_____) _____

3. *Operator* _____
Address _____
City _____ *State* _____ *Zip Code* _____
Phone No. (_____) _____

4. *Name of Property Owner(s)* _____
Address _____
City _____ *State* _____ *Zip Code* _____
Phone No. (_____) _____

List information concerning additional property owners on Attachment 1.

5. *List information concerning owners of mineral rights on Attachment 2.*

6. **Type of Facility:**

- ☐ Contained landfill
☐ Construction/Demolition debris landfill
☐ Residual landfill

If existing, designate the type of application:

- ☐ Vertical expansion ☐ Horizontal expansion
☐ Closure ☐ Groundwater monitoring

7. **Complete Attachment 3 listing all adjacent property owners.**
8. **Provide a notarized true and exact copy of the written determination from the governing body of the waste management area in which this facility is or is proposed to be located concerning the consistency of this application with the area solid waste management plan. This written determination is required by KRS 224.40-315 for all new or expansion applications. The Cabinet is prohibited from accepting an application for processing if this determination is not provided. Label as Attachment 4.**

B. OPERATIONAL AND PERMIT INFORMATION

1. **Complete the waste information below and in Attachment 5.**

Average Daily Fill Rate	<input type="text"/> Tons/Day	<input type="text"/> Cu. Yds./Day
Maximum Daily Fill Rate	<input type="text"/> Tons/Day	<input type="text"/> Cu. Yds./Day
Disposal Rate	<input type="text"/> Tons/Year	<input type="text"/> Cu. Yds./Yr.
Site Life	<input type="text"/> Years	
Total Site Volume	<input type="text"/> Cubic Yards	
Number of acres to be filled:	<input type="text"/> Acres	
Number of acres to be permitted:	<input type="text"/> Acres	

2. **For industrial facilities, complete the following:**

- (a) **List the major U.S. Department of Commerce Standard Industrial Codes.**

(SIC) _____

- (b) *Provide as Attachment 6, the description of the raw materials used for production and the generation process for each waste.*
 - (c) *Describe the physical, chemical, and biological characteristics of the waste. Also, provide a TCLP analysis of the wastes. Label as Attachment 7.*
3. *Complete Attachments 8 and 9 concerning waste management methods and environmental permits.*

C. SITING INFORMATION

1. *Provide directions to the site using roads or highways from a commonly known landmark* _____

2. *Center of Landfill Location:*
Latitude _____ *Longitude* _____
Nearest Community:

Nearest Public Road Intersection:

Nearest Named Stream:

3. *Provide an original current USGS 7.5 minute topographic map, as Attachment 10, showing the existing or proposed waste boundaries and property boundaries. Show the location of the following features located within a one mile radius of the waste boundaries:*

- a. *all surface water intake and discharge structures*
 - b. *all waste management, storage, processing, or disposal facilities*
 - c. *all injection wells*
 - d. *all wells, springs, ephemeral, intermittent, and perennial streams, other surface water bodies, and drinking water wells*
 - e. *airports*
 - f. *fault areas*
 - g. *karst features*
4. (a) *Show the following on a site map for existing or proposed facilities and label as Attachment 11. (Check blanks, if applicable):*
- ☐ *Property lines*
 - ☐ *Adjacent property owners*
 - ☐ *Permit area*
 - ☐ *Fill area*
 - ☐ *Surrounding residences (within 1500' of the waste boundary)*
 - ☐ *100 year floodplain*
 - ☐ *Mine works*
 - ☐ *Un-plugged wells*
 - ☐ *Gas, sewer and water lines*
 - ☐ *Cultural or historic resources listed, or eligible for listing on the National Register of Historic Places*
 - ☐ *Known archaeological sites*
 - ☐ *Critical habitats of federally protected threatened and endangered species*
 - ☐ *Wetlands*
- (b) *Provide as Attachments 12, 13, and 14, the published information to confirm the presence or absence of archaeological sites, critical habitats and wetlands, respectively.*
5. *Include a general county highway map published by the Kentucky Transportation Cabinet showing the location of the site as Attachment 15.*

D. EXISTING FACILITY INFORMATION

If the permit application is for an existing facility the following additional information is required. If not, proceed to the Geotechnical Information Section.

1. *Provide a drawing of the facility showing locations of all past, present, and future waste management areas. Label as Attachment 16.*
2. *Include photographs of structures, existing waste management areas, primary operating components, and anticipated future waste management areas. Label as Attachment 17.*
3. *Include water quality certification if required by the Kentucky Division of Water and Section 401 of the Clean Water Act. Label as Attachment 18.*

E. GEOTECHNICAL INFORMATION

1. *Name of USGS Quadrangle(s) _____*
2. *Provide a review of all pertinent published and existing information on geology, hydrogeology, and hydrology including depth to the seasonal high groundwater table. Also include, quarried areas, caves, and excavations including mines pertaining to the site. Identify as Attachment 19.*
3. *Provide a proposed rock core boring narrative plan as Attachment 20 to satisfy the requirements of 401 KAR 47:170 Section 3(4) and 3(10). Describe how the following information will be obtained:*
 - a. *Geologic data down to the level of the first confining layer below the uppermost aquifer and all units hydraulically connected*
 - b. *Data needed to determine the features of the liner system*
 - c. *Data to describe the site geology, local aquifers associated with the site, and the transmissivity of the aquifers*
 - d. *Field data and test methods for determining hydrogeologic parameters*

4. *Provide a soil boring narrative plan as Attachment 21 to satisfy the requirements of 401 KAR 47:170 Section 3(5). At a minimum, this plan must include the following information:*
 - a. *The field procedures and criteria used for selecting soils for lab analysis*
 - b. *The procedure for field engineering classification of soils*
 - c. *A narrative description of soils selected for lab analysis*
 - d. *Methods to determine the depth of soil borings and their relationship to the limits of landfill excavation*
 - e. *A laboratory analysis plan for a minimum of one soil sample for each soil type found within each 1,000 x 1,000 foot soil examination block. Include a narrative describing the soils to be selected for laboratory examination using a test method approved by the Cabinet*
5. *Provide the following information as Attachment 22 to satisfy the requirements of 401 KAR 47:170 Section 3(6):*
 - a. *Provide directions for closure of the soil borings and rock corings. The closure of these investigative excavations must be acknowledged in writing by a qualified engineering geotechnical investigation professional.*
 - b. *Describe the methods and accuracy to be used to determine the location of the soil borings and rock corings during the subsurface investigation.*
 - c. *Describe the procedures for written documentation for adjustments made in the field for the subsurface investigation.*
6. *Provide a site geotechnical investigation map on a scale of 1 inch equals 400 feet. This map should be identified as Attachment 23 and include the following information:*
 - a. *The limits of all areas to be used for soil borrow or waste disposal*
 - b. *Site topography*
 - c. *SCS soil groups*
 - d. *A regular grid of soil examination block measuring 1,000 feet by 1,000 feet*
 - e. *The locations of proposed soil borings within each soil examination block of the grid with a minimum of one boring per soil type*
 - f. *Additional proposed soil boring locations such that a minimum of nine soil borings shall be taken in each examination block*

g. The proposed locations of rock corings

7. List the additional information sources to be researched by the applicant for the administrative and technical permit applications allowed by 401 KAR 47:170 Section 3(11) including:

_____ Records of the Kentucky Geologic Survey
_____ Records of the Kentucky Department of Mines and Minerals
_____ Surface Mining Permits
_____ Subsurface Excavation and Mining Permits
_____ Other _____

F. PERMIT PREPARATION INFORMATION

1. Engineer _____
Ky. P.E.Registration No. _____
Address _____
City _____ State _____ Zip Code _____
Company Affiliation _____
Phone No. (_____) _____

2. Geologist or Geotechnical Engineer _____
Ky. P.E.Registration No. (if applicable) _____
Address _____
City _____ State _____ Zip Code _____
Company Affiliation _____
Phone No. (_____) _____

3. Indicate the individual(s) authorized to make necessary corrections to this application and to receive related correspondence from the Division:

Name(s) _____
Address _____
City _____ State _____ Zip Code _____

Company Affiliation _____

Phone No. (_____) _____

G. PUBLIC NOTICE

A public notice is required for a new site or a significant expansion to an existing site (see KRS 224.40-310). A draft notice is found in Attachment 24.

H. CERTIFICATION

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations."

Original Signature of Responsible Official

Date

Typed Name of Responsible Official

Title

Name of Applicant, i.e. Corporation or Unit of Government

Subscribed and sworn to before me by _____

this the _____ day of _____, 19____.

Notary Public Signature _____

My commission expires _____

**ATTACHMENT 1
PROPERTY OWNERS**

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

**ATTACHMENT 2
OWNERS OF MINERAL RIGHTS**

Identify the owner(s) of mineral rights beneath the property as required by 401 KAR 47:180 Section 4(7). (Attach additional descriptions as necessary.)

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

Name of Owner(s) _____
Address _____
City _____ State _____ Zip Code _____
Description _____

ATTACHMENT 3
ADJACENT PROPERTY OWNERS

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Name of Property Owner(s) _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

ATTACHMENT 5 **ANTICIPATED WASTE SOURCES, CHARACTERISTICS, AND AMOUNTS**

SOURCE e.g. County, State, etc.	WASTE DESCRIPTION *Commercial, Residential, Industrial, Institutional, or other combination thereof	ANNUAL QUANTITY (Cu. Yds.)	ANNUAL QUANTITY (Tons)
Total			

ATTACHMENT 8

TYPE OF WASTE AND WASTE MANAGEMENT METHODS

Place an X next to the type of waste to be disposed of in this landfill. Describe the special handling method or management for each waste (Example: shredding and daily disposal of tires)

X	TYPE OF WASTE	METHOD OF MANAGEMENT
	Friable Asbestos Material	
	Non-Friable Asbestos	
	Condemned Food	
	MSW Incinerator Ash	
	Other Incinerator Ash	
	Wastewater Treatment Sludge	
	Dead Animals	
	Limited Quantity Hazardous Waste	
	Food Processing Waste	
	Tires	
	Grease Trap Skimmings	
	Pesticide and Herbicide Containers	
	Small Amounts of Non-hazardous Chemicals	
	Domestic Septic Tank Pumpings	
	Underground Storage Tank Soil	
	Other: (List Below)	

ATTACHMENT 9
ENVIRONMENTAL PERMITS HELD BY THE LANDFILL APPLICANT

TYPE OF PERMIT <i>(For existing facilities only)</i>	PERMIT NUMBER OR DATE OF APPLICATION
SOLID WASTE FACILITY <i>(Disposal or processing of solid waste)</i>	
HAZARDOUS WASTE FACILITY <i>(Treatment, storage or disposal of hazardous waste)</i>	
UNDERGROUND INJECTION CONTROL (UIC) <i>(Injection of fluids underground)</i>	
KPDES OR NPDES <i>(Discharge into a surface stream)</i>	
SURFACE MINING <i>(Extraction of coal or minerals)</i>	
PREVENTION OF SIGNIFICANT DETERIORATION (PSD) <i>(An area air quality permit)</i>	
NON-ATTAINMENT <i>(An area air quality permit)</i>	
CONSTRUCTION IN 100 YEAR FLOODPLAIN	
DAM SAFETY <i>(Construction of a dam higher than 25 feet and impounding more than 50 acre feet)</i>	
ASBESTOS <i>(Demolition and handling permit from the Division for Air Quality)</i>	
SOLID WASTE COMBUSTION <i>(Incineration of solid waste)</i>	
WATER QUALITY CERTIFICATION <i>(Disturbance within 250 feet of an intermittent or perennial stream.)</i>	
DEPARTMENT OF MINES AND MINERALS <i>(Subsurface mining or blasting)</i>	
OTHER: (List Below)	

ATTACHMENT 24-A
PUBLIC NOTICE FOR A PROPOSED LANDFILL

The Natural Resources and Environmental Protection Cabinet, Division of Waste Management, has received a notice of intent to apply for a solid waste disposal site permit.

The applicant intends to construct a landfill to meet the requirements of KRS Chapter 224, and 401 KAR Chapters 47 and 48, and related regulations. The facility, as proposed, would be used to dispose of _____

_____ originating from _____

The proposed landfill will have an estimated capacity of _____ cubic yards. The landfill is proposed to be permitted for approximately _____ acres. _____ acres are to be designed for waste disposal.

The location of the proposed site is _____

_____ and may be accessed from _____

_____ by traveling _____

A description of the business conducted at the facility is _____

The name and mailing address of the applicant and facility contact person is:

Name of Applicant _____

Address _____

City _____ State _____ Zip code _____

Contact Person _____

Telephone No. (_____) _____

The application is on file at the Division of Waste Management office. Further information may be obtained by calling (502) 564-6716 or by writing to:

Solid Waste Branch

Division of Waste Management

18 Reilly Road

Frankfort, Kentucky 40601

Please refer to application number * _____ in all inquiries.

This notice is published pursuant to KRS 224.40-310.

**To be determined by the Division of Waste Management*

ATTACHMENT 24-B
PUBLIC NOTICE FOR A SUBSTANTIAL ADDITIONAL
CAPACITY EXPANSION TO AN EXISTING LANDFILL

The Natural Resources and Environmental Protection Cabinet, Division of Waste Management, has received a notice of intent to apply for a solid waste disposal site permit expansion to existing permit number _____. The permit modification must meet the requirements of KRS Chapter 224, 401 KAR Chapters 47 and 48, and related regulations. The permit as expanded would authorize the disposal of _____

_____ originating from _____

The proposed landfill expansion will have a capacity of _____ cubic yards. The landfill expansion is proposed to be permitted for _____ acres. _____ acres are to be designed for waste disposal.

The location of the proposed expansion is: _____ and may be accessed from _____

_____ by traveling _____

A description of the business conducted at the facility is: _____

The name and mailing address of the applicant and facility contact person is:

Name of Applicant _____

Address: _____

City _____ State _____ Zip code _____

Contact Person: _____

Telephone No. (_____) _____

The application is on file at the Division of Waste Management office. Further information may be obtained by calling (502) 564-6716 or by writing to:

Solid Waste Branch

Division of Waste Management

18 Reilly Road

Frankfort, Kentucky 40601

Please refer to application number * _____ in all inquiries.

This notice is published pursuant to KRS 224.40-310.

**To be determined by the Division of Waste Management*